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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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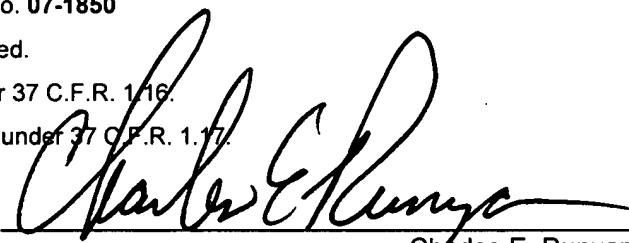
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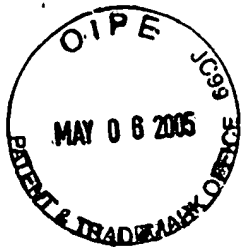
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/623,872	
	Filing Date	July 21, 2003	
	First Named Inventor	Ai Kondo	
	Group Art Unit	1711	
	Examiner Name	Sanza L. McClendon	
Total Number of Pages in This Submission (excluding references)	12	Attorney Docket Number	56232.90

ENCLOSURES (check all that apply)				
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input checked="" type="checkbox"/> Postage Paid Return Postcard <input checked="" type="checkbox"/> Response (6 pages) <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Declaration (3 pages) <input checked="" type="checkbox"/> Amendment Transmittal (in duplicate) <input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 <input checked="" type="checkbox"/> Express Mail Label No. EV 337 971 687 US <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Notice to File Missing Parts (in duplicate) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing Formal __ Replacement Sheet <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Oath/Declaration/Power of Attorney (signed) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):		
<table border="1" style="width: 100%;"> <tr> <td style="width: 30%; height: 40px; vertical-align: top;">Remarks</td> <td></td> </tr> </table>			Remarks	
Remarks				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Squire, Sanders & Demsey L.L.P. Charles E. Runyan, Jr. Ph.D. Reg. No. 43,066
Signature	
Date	May 6, 2005

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail Label No. EV 337 971 687 US in an envelope addressed to: MAIL STOP: AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: May 6, 2005			
Typed or printed name	Patricia Gamble		
Signature		Date	May 6, 2005

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 56232.90	
Applicant(s): Ai Kondo					
Serial No. 10/623,872	Filing Date July 21, 2000	Examiner Sanza L. McClendon		Group Art Unit 1711	
Invention: Curable White Ink					
TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as show below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12	20	0	X \$50.00	\$00.00
INDEP. CLAIMS	1	3	0	X \$200.00	\$00.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$00.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$00.00
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. 07-1850 in the amount of \$00.00</p> <p>A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. 07-1850</p> <p>A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent application processing fees under 37 C.F.R. 1.17.</p> </div> <div style="width: 35%; text-align: right;">  <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p>Charles E. Runyan Reg. No. 43,066</p> </div> </div> <p>Dated: May 6, 2005 Squire, Sanders & Dempsey L.L.P. 1 Maritime Plaza, Suite 300 San Francisco, CA 94111 (415) 954-0200</p> <p>cc: Docket:</p>					



PATENT
Attorney Docket No.: 56232.00090

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Ai Kondo	Examiner: Sanza L. McClendon
Serial No. 10/623,872	Art Unit: 1711
Filed: July 21, 2003	
Title: Curable White Ink	

Commissioner for Patents
USPTO
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Dear Examiner McClendon:

This responds to the Office Action dated February 24, 2005.